| DECLARATION FOR UTILITY PATENT APPLICATION (37 C.F.R. 1.63) | | Attorney Docket No. | 169.12-0 | 587 |
|--|--|--|---|---|
| | | First Named Inventor | Joel Dav | id Limmer |
| | | COMPLETE IF KNOWN | | |
| X Declaration | Declaration Submitted after Initial Filing (Surcharge (37 C.F.R. 1.16(e)) Required) | Application Number | | |
| Submitted with Initial | | Filing Date | Herewitl | 1 |
| Filing | | Group Art Unit | | |
| | | Examiner Name | | |
| As a below named in | ventor, I hereby declare that m | ny residence, post office add | ess, and citi | zenship are as stated below. |
| I hereby state that I I amended by any amendment I acknowledge the d I hereby claim foreign prio certificate, or 365(a) of any F listed below and have also id | as United States Application No cable). nave reviewed and understand a specifically referred to above. uty to disclose information which the companion of the | the contents of the above ide ich is material to patentabilit 19(a)-(d) or 365(b) of any thich designated at least one content of the content | entified spec y as defined foreign appli ountry other to n for patent | cation(s) for patent or inventor's han the United States of America, or inventor's certificate, or of any |
| PCT international application Prior Foreign Application Number(s) | on having a filing date before the Country | Foreign Filing Date (MM/DD/YYYY) | | Certified Copy Attached? Yes No |
| | | , | | |
| I hereby claim the benefit u | 1 25110 (2 110() - 51 | | | |
| ciann are cononca | nder 35 U.S.C. 119(e) of any C | Inited States provisional app | lication(s) li | sted below. |
| • | | | | sted below. IM/DD/YYYY) |
| I hereby claim the benefit udesignating the United States disclosed in the prior United acknowledge the duty to discontinuous acknowledge the duty acknowledge the | nder 35 U.S.C. 120 of any Ur of America, listed below and, States or PCT international ap | nited States application(s), or insofar as the subject matter plication in the manner provierial to patentability as defi | r 365(c) of of each of eided by the ned in 37 C. | any PCT international application the claims of this application is not first paragraph of 35 U.S.C. 112, IF.R. 1.56 which became available |

DIRECT ALL CORRESPONDENCE TO:

| G . | |
|--------------------|---|
| Customer Number | 00164 |
| 14dittoes | |
| Attention | Mai-Tram D. Lauer |
| Telephone | (612) 339-1863 |
| Fax | (612) 339-6580 |
| I hereby declar | e that all statements made herein of my own knowledge are true and that all statements made on information and belief |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| Sole or First Invento | r: | | |
|--|---------------------------|--------------------------------|--|
| Given Name (First and middle (if any)) Joel David | | Family Name or Surname Limmer | |
| | | | |
| Residence | Bloomington, MN | Citizenship: USA | |
| Mailing Address | 8740 Elliot Avenue South | | |
| City, State, Country | Bloomington, MN 55420 USA | | |

| Second Inventor: | | |
|----------------------|--------------------------------|------------------------|
| Given Na | me (First and middle (if any)) | Family Name or Surname |
| | Zine-Eddine | Boutaghou |
| Inventor's signature | Month houbs | Date: 18 Jun 03 |
| Residence | Vadnais Heights, MN | Citizenship: USA |
| Mailing Address | 307 Lily Pond Lane | |
| City, State, Country | Vadnais Heights, MN 55127 | |

| Third Inventor: | | | | | |
|---|--------------------------|-------------------------------|--|-------------------------|-------|
| Given Name (First and middle (if any)) Wayne Allen | | Family Name or Surname Bonin | | | |
| | | | | Inventor's signature | may ~ |
| Residence | North Oaks, MN | Citizenship: USA | | | |
| Mailing Address | 21 Black Oak Road | | | | |
| City, State, Country | North Oaks, MN 55127 USA | | | | |